

Senior Executive Service APPRAISAL RECORD				Employee Comments Attached <input type="checkbox"/> Yes <input type="checkbox"/> No		APPRAISAL PERIOD From _____ To _____				
NAME (Last, First, MI)				PAY RATE	TITLE					
PRB		AGENCY			SOCIAL SECURITY #		ACCOUNTING CODE			
DATE ENTERED SES		DATES OF LAST (MM/YYYY): Bonus: _____ PRA: _____ D. Rank _____ M. Rank _____								
SUPERVISOR'S INITIAL RATING						PRB RATING				
PERFORMANCE ELEMENT <i>(check box if element is critical)</i>				Exceeds Fully Successful	Meets Fully Successful	Does Not Meet Fully Successful	Exceeds Fully Successful	Meets Fully Successful	Does Not Meet Fully Successful	1. Accomplishments exceed rating 2. Accomplishments do not support rating 3. Other (specify)
1. Mission Results										
2. Business Results										
3. Civil Rights										
4. Homeland Security										
5.										
6.										
7.										
8.										
TOTAL				Exceeds	Meets	Does Not Meet	Exceeds	Meets	Does Not Meet	TOTAL
SUMMARY RATING (check one)						PRB SUMMARY RATING (check one)				
OUTSTANDING <input type="checkbox"/> All appraisal units are at "Exceeds."						<input type="checkbox"/> CONCUR WITH SUPERVISORY SUMMARY RATING				
SUPERIOR <input type="checkbox"/> More appraisal units are at "Exceeds" than at "Meets fully successful" but none are rated "Does not meet."						<input type="checkbox"/> CHANGE SUMMARY RATING TO (specify):				
FULLY SUCCESSFUL <input type="checkbox"/> Any combination of appraisal units which fall between "Superior" and "Minimally Satisfactory."										
MINIMALLY SATISFACTORY <input type="checkbox"/> More appraisal units are at "Does not meet" than at "Exceeds."										
UNSATISFACTORY <input type="checkbox"/> One or more critical elements are appraised at "Does not meet."										
I have a copy of the Governmentwide standards of conduct (including USDA/Agency regs). <input type="checkbox"/> yes <input type="checkbox"/> no						PRB RECOMMENDATIONS <input type="checkbox"/> RETAIN <input type="checkbox"/> BONUS <input type="checkbox"/> REASSIGN <input type="checkbox"/> D. RANK AWARD <input type="checkbox"/> REMOVE <input type="checkbox"/> M. RANK AWARD <input type="checkbox"/> PRA to ES - ____				
I attended the required annual ethics training. <input type="checkbox"/> yes <input type="checkbox"/> no										
SUPERVISOR'S SIGNATURE & DATE				REVIEWER'S SIGNATURE & DATE		PRB CHAIRPERSON'S SIGNATURE & DATE				
SECRETARY'S OFFICE OR AGENCY HEAD RECOMMENDATIONS										
(more than one block may apply) <input type="checkbox"/> RETAIN <input type="checkbox"/> REASSIGN <input type="checkbox"/> REMOVE * <input type="checkbox"/> BONUS * <input type="checkbox"/> D. RANK AWARD <input type="checkbox"/> M. RANK AWARD <input type="checkbox"/> PRA to ES - ____ *							SIGNATURE OF SECRETARY'S OFFICE OR AGENCY HEAD & DATE			
* Justify on reverse recommended actions based on appraisal, summarizing briefly managerial and program accomplishments and impact on agency or Department.										
SECRETARY'S APPROVAL – FINAL RATING										
SIGNATURE OF SECRETARY					DATE	RATING	PRA to ES - ____	BONUS AMOUNT		

JUSTIFICATION FOR AGENCY HEAD RECOMMENDATIONS: Justify recommended actions based on appraisal, summarizing briefly managerial and program accomplishments and impact on Agency or Department.
